

F&amp;R 4-22-2003

## Checklist for RESPONSE TO OFFICE ACTION

June 17, 2004

Client/Matter Number: 17539-013001

Client/Matter Name: STL 9980 - Method and Apparatus For Read Error Recovery

Sec	Att	PS	Check Items								
<b>PRE-FILING DETERMINATIONS</b>											
	<input checked="" type="checkbox"/>		<b>Timing</b> Action has been checked to confirm the due date was docketed correctly & is satisfied by this Response								
<b>REQUIRED FILING ENCLOSURES</b>											
X	<input checked="" type="checkbox"/>		<b>Caption</b> (1) serial number, & (2) filing date have been checked for accuracy against information in the file.								
NA	<input checked="" type="checkbox"/>		<b>Postcard</b> (1) billing attorney's initials, & (2) list of all papers being sent and the pages of each.								
X	<input checked="" type="checkbox"/>		<b>Response</b> (1) requests consideration of all filed IDS' not considered by Examiner, with each item on all Form 1449's initiated, (2) identifies mailing date of Action, (3) lists all items being submitted, & (4) includes standard charges/credits statement								
X	<input checked="" type="checkbox"/>		<b>Formatting</b> X Each Section begins on a different page: Introductory Comments, Spec, Claims, Abstract, Drawings, Remarks <input checked="" type="checkbox"/> All claims are presented, necessary when at least one claim is being added, currently amended, cancelled, withdrawn								
X	<input checked="" type="checkbox"/>		<b>Filing fee</b> <input type="radio"/> NONE REQUIRED <input type="radio"/> CHECK X DEPOSIT ACCOUNT CHARGE, indicated on document								
X	<input checked="" type="checkbox"/>		<b>Ext. of Time</b> <input type="radio"/> NONE REQUIRED X INCLUDED, with fee								
X	<input checked="" type="checkbox"/>		<b>Appeal/Con. App.</b> X NONE REQUIRED <input type="radio"/> INCLUDED, if responding to FINAL action within 1 month before 6-mon. BAR								
NA	<input checked="" type="checkbox"/>		<b>Mail Certificate</b> (1) includes 1st Class mail certificate, & (2) is signed and dated								
NA	<input checked="" type="checkbox"/>		<b>Envelope</b> Preprinted envelope or label is used, addressed to:  NON-FINAL actions: MAIL STOP AMENDMENT Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450  FINAL actions: MAIL STOP AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450								
<b>TASKS AFTER ATTORNEY/AGENT CHECK</b>											
<input checked="" type="checkbox"/>			<b>File copies</b> (1) are complete & (2) include all signatures and dates								
<input checked="" type="checkbox"/>			<b>Manual Docket</b> Billing secretary's manual docket entry is updated								
<input checked="" type="checkbox"/>			<b>Database Update</b> Copy of postcard sent to Patent Services								
<input checked="" type="checkbox"/>			<b>Folder Update</b> File copy, tab, and updated table of contents are filed in prosecution folder								
<table border="0"> <tr> <td>Checked By:</td> <td><i>[Signature]</i></td> <td><i>[Signature]</i></td> <td>6/17/04</td> </tr> <tr> <td></td> <td>Secretary</td> <td>Attorney/Agent</td> <td>Date</td> </tr> </table>				Checked By:	<i>[Signature]</i>	<i>[Signature]</i>	6/17/04		Secretary	Attorney/Agent	Date
Checked By:	<i>[Signature]</i>	<i>[Signature]</i>	6/17/04								
	Secretary	Attorney/Agent	Date								